

CLAIMS ONLY

Application Number

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments							
	Indep	Depend	Indep	Depend	Indep	Depend	Indep		Depend		Indep		Depend	
1	/	/					51							
2	/	/					52							
3	/	/					53							
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49	/	/					99							
50	/	/					100							
Total							Total							
Indep							Indep							
Total							Total							
Depend							Depend							
Total							Total							
Claims							Claims							